

In re Patent Application of
ROY
Serial No. **10/777,871**
Filed: **2/12/04**



IN THE APPLICATION TRANSMITTAL DATA SHEET:

Please change the priority information to be published to:

Applicant claims priority benefit to the following U.S. application(s):

Application No.: **60/493,165**

Filing Date: **August 7, 2003**

Application No.: **60/493,167**

Filing Date: **August 7, 2003**

Attached is a copy of a substitute application transmittal data sheet.



CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: COMMISSIONER OF PATENTS AND TRADEMARKS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, on this 3rd day of March, 2004.

Justin Dorn

MS Patent Application
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450



I HEREBY CERTIFY THAT PAPER OR FEE IS BEING DEPOSITED WITH THE U.S. POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED BELOW AND IS ADDRESSED TO: MS PATENT APPLICATION, PO BOX 1450, ALEXANDRIA, VA 22313-1450.

EXPRESS MAIL NO: EV331552925DATE OF DEPOSIT: February 12, 2004NAME: JUSTIN GOREESIGNATURE: Justin GoreeInventor: **Shaibal ROY**For: **COMMUNICATIONS SYSTEM PROVIDING REDUCED ACCESS LATENCY AND RELATED METHODS****Enclosed are:**

[X] Patent Application: 67 pages, 33 claims
[X] 13 sheets of drawings
[X] The suggested drawing figure to be published is FIG. 1
[X] A declaration and power of attorney
[X] An assignment in the name of TEAMON SYSTEMS, INC.
[X] Citation Under 37 CFR 1.97 and PTO-1449
[X] Assignee info:
Name: TEAMON SYSTEMS, INC.
Address: 1180 NW Maple Street, Suite 201
Issaquah, WA 98027
State of incorporation: Delaware

[X] Applicant claims priority benefit to the following U.S. application(s):
Application No.: 60/493,165 Filing Date: August 7, 2003
Application No.: 60/493,167 Filing Date: August 7, 2003

The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	SMALL ENTITY		LARGE ENTITY	
FOR:	# FILED		# EXTRA	RATE	FEE	RATE	FEE
BASIC FEE					\$ 385		\$.770
TOTAL CLAIMS	33	-20	13	X 9	\$	X 18	\$ 234
INDEP CLAIMS	5	-3	2	X 43	\$	X 86	\$ 172

* If the difference in Col. 1 is less than "0", enter "0" in Col. 2.

[X] THE COMMISSIONER IS HEREBY AUTHORIZED TO CHARGE THE FEE IN THE AMOUNT OF \$1176.00 TO THE CREDIT CARD NOTED IN THE ATTACHED CREDIT CARD PAYMENT FORM

[X] The Commissioner is authorized to charge or credit any discrepancies in fee amounts to Deposit Account No. 01-0484.

[X] **PLEASE ADDRESS CORRESPONDENCE TO ATTORNEY OF RECORD:**
CHRISTOPHER F. REGAN

[X] Please associate this application with Customer No. 27975.



CHRISTOPHER F. REGAN
Reg. No. 34,906

February 12, 2004
Date